Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 1 of 37

Fill in this information to identify your case:		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA		
Case number (if known)	Chapter 11	☐ Check if this an
		amended filing
Official Form 201		

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1.	Debtor's name	CAH Acquisition Company 12, LLC	
2.	All other names debtor used in the last 8 years Include any assumed names, trade names and	DBA Fairfax Community Hospital	
	doing business as names		
3.	Debtor's federal Employer Identification Number (EIN)	27-1730967	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		40 Hospital Rd. Fairfax, OK 74637	
		Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
		Osage County	Location of principal assets, if different from principal place of business
			Number, Street, City, State & ZIP Code
5.	Debtor's website (URL)		
	Type of debter	_	
6.	Type of debtor	 Corporation (including Limited Liability Company 	y (LLC) and Limited Liability Partnership (LLP))
		☐ Partnership (excluding LLP)	
		☐ Other. Specify:	

Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 2 of 37

4/01/19 3:10PM

Debt	O/til /toquioit	ion Com	pany 12	2, LLC					Case number	er (if known)	
	Name										
7.	Describe debtor's bu	usiness	A. Chec	k one:							
•	20001.20 40210. 0 2				Rueinas	ss (as defined i	in 11	S C & 10°	Ι/27Δ\\		
						,		_	, ,,		
						state (as define		_	101(51B))		
				•		in 11 U.S.C. §		•			
				•		ned in 11 U.S.(. ,,			
				-	•	as defined in 1		- , ,)		
			☐ Clea	iring Bank	k (as de	efined in 11 U.S	S.C. § 78	81(3))			
			□ None of the above								
			B. Chec	k all that	apply						
						s described in 2	26 U.S.C	C. §501)			
			☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)								
						as defined in 1	•	•		,	,
			0.1110	0 (1) (1					\		
			C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes .								
8.	Under which chapte	or of the	Check o	nno.							
0.	Bankruptcy Code is	460	☐ Chap								
	debtor filing?		☐ Chap								
			_ `								
			 ■ Chapter 11. Check all that apply: □ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) 								
											nd every 3 years after that).
						The debtor is	a small	business	debtor as defi	ined in 11 U.S.C. § 101(5	1D). If the debtor is a small
										nce sheet, statement of of all of these documents of	
						procedure in				all of these documents t	TO HOL EXIST, TOHOW THE
						A plan is beir	ng filed w	vith this p	etition.		
						Acceptances	of the pl	lan were	solicited prepe	tition from one or more c	lasses of creditors, in
						accordance v				(for example 10K and 1	20) with the Convities and
					Ц						OQ) with the Securities and change Act of 1934. File the
						attachment to (Official Form				viduals Filing for Bankrup	otcy under Chapter 11
						•	,			the Securities Exchange	Act of 1934 Rule 12h-2
			☐ Chap	nter 12	_	THE GEDION IS	a silon c	company	as defined in t	ine decurrines Exchange	Act of 1354 Rule 125 2.
			_ 0	pto: 12							
		1									
9.	Were prior bankrupt cases filed by or aga		☐ No.								
	the debtor within the years?	e last 8	Yes.								
	If more than 2 cases,	attach a			Fact	tern District	of				
	separate list.	allacii a		District		h Carolina	OI .	When	3/17/19	Case number	9-01229-5-JNC
					Wes	tern District	of				
				District	Miss	souri		_ When	10/23/11	Case number	11-44749-drd11
10.	Are any bankruptcy	cases	□ No								
	pending or being file	ed by a	_								
	business partner or affiliate of the debto		■ Yes.								
	List all cases. If more				<u></u>	Assa-l					
	attach a separate list			Debtor	266	Attachment				Relationship	
				District				_ When		Case number, if	known

Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 3 of 37

Deb	CAH Acquisition C	ompany	12, LLC	Case number (if known)			
11.	Why is the case filed in	Check all that apply:						
	this district?			cipal place of business, or principal assets n or for a longer part of such 180 days than				
		□ A	bankruptcy case concerning de	ebtor's affiliate, general partner, or partners	hip is pending in this district.			
12.	Does the debtor own or	■ No						
	have possession of any real property or personal property that needs	☐ Yes.	Answer below for each prope	additional sheets if needed.				
	immediate attention?		Why does the property nee	d immediate attention? (Check all that ap	pply.)			
			☐ It poses or is alleged to power what is the hazard?	ose a threat of imminent and identifiable ha	zard to public health or safety.			
			☐ It needs to be physically s	ecured or protected from the weather.				
				ds or assets that could quickly deteriorate of meat, dairy, produce, or securities-related	or lose value without attention (for example,			
			Other	meat, dairy, produce, or securities related	, ,			
			Where is the property?					
				Number, Street, City, State & ZIP Code				
			Is the property insured?					
			□ No					
			Yes. Insurance agency					
			Contact name					
			Phone					
	Statistical and admin	istrative i	information					
13.	Debtor's estimation of	. (Check one:					
	available funds	[☐ Funds will be available for di	stribution to unsecured creditors.				
		ı	After any administrative expe	enses are paid, no funds will be available to	o unsecured creditors.			
14.	Estimated number of	☐ 1-49		☐ 1,000-5,000	☐ 25,001-50,000			
	creditors	☐ 50-99	9	☐ 5001-10,000	☐ 50,001-100,000			
		□ 100-1	199	□ 10,001-25,000	☐ More than100,000			
		200-9	999					
15.	Estimated Assets	□ \$0 - \$	\$50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
		\$50,0	001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500	,001 - \$1 million	— \$100,000,001 - \$500 million	☐ More than \$50 billion			
16.	Estimated liabilities	□ \$0 - \$	\$50,000	■ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
			001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000	☐ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500	,001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion			

Debtor CAH Acquisition Company 12, LLC Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

Name

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Email address

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is trued and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 1, 2019

MM / DD / YYYY

 $X_{\underline{}}$ /s/ Charles E. Cartwright, Trustee for Receiver for Debtor

Signature of authorized representative of debtor

Trustee, Fairfax Healthcare Authority,
Title Receiver for Debtor

Charles E. Cartwright, Trustee for Receiver for Debtor

Printed name

18. Signature of attorney

X /s/ Sam G. Bratton

Signature of attorney for debtor

Date **April 1, 2019**MM / DD / YYYY

sbratton@dsda.com

Sam G. Bratton

Printed name

Doerner, Saunders, Daniel & Anderson, L.L.P.

Firm name

Two West Second Street, Suite 700 Tulsa, OK 74103-3117

Number, Street, City, State & ZIP Code

OBA No. 1086 OK

(918) 582-1211

OBA No. 1086 OK

Bar number and State

Contact phone

CAH Acquisition Company 12, LLC
Name Debtor

Case number (if known)	
------------------------	--

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OKLAHOMA		
Case number (if known)	Chapter 11	
		☐ Chec ame

k if this an nded filing

FORM 201. VOLUNTARY PETITION

Pending Bankruptcy Cases Attachment

Debtor	CAH Acquisition Company #1 LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	2/19/19	Case number, if known	5:2019bk00730
Debtor	CAH Acquisition Company #2 LLC			Relationship to you	
District	North Carolina Eastern Bankrputcy Court	When	3/17/19	Case number, if known	5:2019bk01230
Debtor	CAH Acquisition Company #3 LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	3/14/19	Case number, if known	5:2019bk01180
Debtor	CAH Acquisition Company #4 LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	3/17/19	Case number, if known	5:2019bk01228
Debtor	CAH Acquisition Company #5 LLC			Relationship to you	
District	Kansas Bankruptcy Court	When	3/13/19	Case number, if known	6:2019bk10359
Debtor	CAH Acquisition Company 11, LLC			Relationship to you	
District	Tennessee Western Bankruptcy Court	When	3/08/19	Case number, if known	2:2019bk22020
Debtor	CAH Acquisition Company 12, LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	3/17/19	Case number, if known	5:2019bk01229
Debtor	CAH Acquisition Company 6, LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	3/21/19	Case number, if known	4:2019bk01300
Debtor	CAH Acquisition Company 7, LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	When	3/21/19	Case number, if known	5:2019bk01298
Debtor	CAH Acquisition Company 7, LLC.			Relationship to you	
District	Oklahoma Western Bankruptcy Court	When	3/21/19	Case number, if known	5:2019bk11040
Debtor	CAH Acquistion Company 16, LLC			Relationship to you	
District	North Carolina Eastern Bankruptcy Court	_ When	3/17/19	Case number, if known	5:2019bk012227

Fill in this info	Fill in this information to identify the case:					
Debtor name	CAH Acquisition Company 12, LLC					
United States B	ankruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA					
Case number (i	f known)	☐ Check if this is an amended filing				
•		-				

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information	in the documents checked below and I have a reasonable belief that the information is true and correct:					
□ Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B) □ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) □ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) □ Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G) □ Schedule H: Codebtors (Official Form 206H) □ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum) □ Amended Schedule □ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204) □ Other document that requires a declaration						
I declare under penalty of perjur	y that the foregoing is true and correct.					
Executed on April 1, 2019 X /s/ Charles E. Cartwright, Trustee for Receiver for Debtor Signature of individual signing on behalf of debtor Charles E. Cartwright, Trustee for Receiver for Debtor Printed name Trustee, Fairfax Healthcare Authority, Receiver for Debtor						

Position or relationship to debtor

Fill in this information to identify the case:						
Debtor name	Debtor name CAH Acquisition Company 12, LLC					
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF OKLAHOMA		☐ Check if this is an			
Case number (if known):			amended filing			

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. Total claim, if Deduction for value Unsecured claim			
		contracts)		partially secured	of collateral or setoff		
QUALITY SYSTEMS PO BOX 511449 LOS ANGELES, California 90051-0000	Maureen Lavictoire mlavictoire@harris computer.com 888-847-7747 ext 2663	NextGen Billing Software Services				\$175,564.54	
REBOOT, INC PO BOX 775535 CHICAGO, Illinois 60677-0000	3172254476	IT Professional Services				\$57,744.00	
3M 2807 PAYSPHERE CIRCLE CHICAGO, Illinois 60674-0000	6517331110	Coding Software Services				\$39,418.88	
GENE EVANS 44702 S. 34700 Rd. PAWNEE, Oklahoma 74058-0000	Gene Evans MD pawneedoc.@yaho o.com 918-762-3942	Professional Services				\$36,322.00	
SHARED MEDICAL SERVICES INC 209 LIMESTONE PASS COTTAGE GROVE, Wisconsin 53527-0000	Kathy Pitzner kpitzner@sharedm ed.com 608-839-9050 ext 1275	MRI Services				\$32,404.20	
HIPPA-GUARD PO BOX 80019 #86038 INDIANAPOLIS, Indiana 46280-0000	3173168880	HIPAA Compliance Services				\$29,538.00	
CPSI PO BOX 850309 MOBILE, Alabama 36685-0000	8774241777	Payroll and Billing Software Services				\$19,081.29	

4/01/19 3:10PM

Debtor CAH Acquisition Company 12, LLC

Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.			
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim	
TRUCODE, LLC 150 BURFORD	Joanna Neri	Coding Software Services				\$18,219.00	
HOLLOW ALPHARETTA, Georgia 30022-0000	jneri@trucode.com 404-606-1699						
PATRIOT PLACEMENT	Rodney Skelton	Contract Nursing Services				\$17,921.82	
STAFFING LLC 2105 BRIARWOOD DRIVE AMARILLO, Texas 79124-0000	rodskelton@gmail. com 806-553.5280						
LABCORP PO BOX 12140	Yoana Molina	Reference Lab Services				\$17,733.27	
BURLINGTON, North Carolina 27216-0000	moliny1@labcorp.c om 800-222-7566 ext 65478	Convices					
ARJO, INC. PO BOX 640799 PITTSBURGH,	nick.williams@arjo. com	Medical Supplies				\$16,240.34	
Pennsylvania 15264-0000	nick.williams@arjo. com 925-330-6251						
SYSCO FOOD SERVICES PO BOX 1127 NORMAN, Oklahoma 73070-0000	Jennifer Kopeki kopeki.jennifer@ok sysco.com 281-758-6583	Dietery and Housekeeping Supplies				\$16,152.13	
OSU FOUNDATION 400 S MONROE STILLWATER, Oklahoma	Dee Niles dniles@osugiving. com	Recruiting Services				\$16,000.00	
74074-0000	405-385-5136						
BECKMAN COULTER INC DEPT CH 10164 PALATINE, Illinois 60055-0000	ggarcia02@beckm an.com 714-792-1462	Lab Equipment Rental/Reagents				\$14,422.61	
MILLER EMS, LLC PO BOX 65 MEDFORD, Oklahoma 73759-0000	Matthew Miller mems@millerems. com 580-395-2426	Ambulatory Transportation Services				\$14,281.86	
MEDLINE INDUSTRIES INC PO BOX 121080 DEPT 1080 DALLAS, Texas 75312-0000	Shane Reed sreed@medline.co m 262-367-7501 ext 2252	Medical Supplies				\$13,374.05	

Case number (if known)

4/01/19 3:10PM

Debtor CAH Acquisition Company 12, LLC

Name

EDMOND, Oklahoma

73034-7296

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	t, If the claim is fully unsecured, fill in only unsecured cla		nt and deduction for
		professional services,	uisputeu	Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
STANDLEY SYSTEMS, LLC PO BOX 460 CHICKASHA, Oklahoma 73023-0000	Tom Fender tfender@standleys. com 580-761-4163	Copier Services				\$11,770.49
GAS & SUPPLY 125 THRUWAY PARK BROUSSARD, Louisiana 70518-3601	Kathy Walsh cathy.walsh@gasa ndsupply.com 918-224-6455	Oxygen Vendor				\$11,745.79
UNITED LINEN UNIFORM SERVICES 400 WEST FRANK PHILLIPS BARTLESVILLE, Oklahoma 74005-0000	8002596808	Linen Services				\$10,335.04
HEARTLAND PATHOLOGY CONSULTANT 3509 FRENCH PARK DRIVE SUITE D	Vicki Bogard vbogard@heartlan dpath.com 405-715-4500	Pathology Services				\$9,729.15

Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 10 of 37

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Oklahoma

In 1	re CAH Acquisition	Company 12, LLC		Case N	o	
			Debtor(s)	Chapte	r 11	
	DISC	LOSURE OF CO	OMPENSATION OF AT	TORNEY FOR	DEBTOR(S)	
1.	compensation paid to m	e within one year before	e. P. 2016(b), I certify that I am the re the filing of the petition in bankr replation of or in connection with t	ruptcy, or agreed to be p	aid to me, for services rendered or to	
	For legal services,	I have agreed to accept		\$	12,599.50	
	Prior to the filing of	of this statement I have	received	\$	12,599.50	
	Balance Due			\$	0.00	
2.	The source of the comp	ensation paid to me wa	s:			
	☐ Debtor	Other (specify):	Town of Fairfax, OK.			
3.	The source of compensa	ation to be paid to me is	x			
	☐ Debtor	Other (specify):	Town of Fairfax, OK or pure	chaser		
4.	_				embers and associates of my law firm	n.
	☐ I have agreed to shat copy of the agreement	are the above-disclosed ent, together with a list	compensation with a person or per of the names of the people sharing	rsons who are not memb in the compensation is	ers or associates of my law firm. A attached.	
5.	In return for the above-	disclosed fee, I have ag	reed to render legal service for all	aspects of the bankrupto	cy case, including:	
		g of any petition, sched	and rendering advice to the debtor lules, statement of affairs and plan			
6.	By agreement with the o	debtor(s), the above-dis	closed fee does not include the fol	lowing service:		
			CERTIFICATION			
this	I certify that the foregoi bankruptcy proceeding.	ng is a complete staten	ent of any agreement or arrangement	ent for payment to me for	or representation of the debtor(s) in	
	April 1, 2019		/s/ Sam G. E			
	Date		Sam G. Brat			
				unders, Daniel & An		
				econd Street, Suite	700	
			Tulsa, OK 7 (918) 582-12	4103-3117 211 Fax: (918) 591-5	360	
			_sbratton@d	sda.com		
			Name of law f	firm		

Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 11 of 37

4/01/19 3:10PM

United States Bankruptcy Court Northern District of Oklahoma

In re CAH Acquisition Company 12, LLC	CAH Acquisition Company 12, LLC			Case No.				
	Γ	Debtor(s)	Chapter	11				
LIST OF EQUITY SECURITY HOLDERS								
Following is the list of the Debtor's equity security holders w	vhich is prepar	ed in accordance with rule 1	007(a)(3) fo	r filing in this Chapter 11 Case				
Name and last known address or place of business of holder	urity Class	Number of Securities	K	ind of Interest				
Health Acquisition CO, LLC,A West VA LLC								
HMC/CAH Consolidated, Inc. A Delaware Co								
DECLARATION UNDER PENALTY OF PEI	RJURY ON	BEHALF OF CORP	ORATIO	N OR PARTNERSHIP				
I, the Trustee , Fairfax Healthcare Authority declare under penalty of perjury that I have read t correct to the best of my information and belief.		-						
Date April 1, 2019	_ Signat			stee for Receiver for Debtor e for Receiver for Debtor				

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Revised 02/2012

United States Bankruptcy Court Northern District of Oklahoma

140	i tiici ii Disti ict	OI OK	lanoma			
In re CAH Acquisition Company 12, LLC						
	Debt	tor(s)		Chapter		
VERIFICATIO	N AS TO OFF	ICIAL	CREDITO	R LIST		
_	0.	امدادها				
		riginal mendm	ont			
_	l Add	ш	Delete			
I hereby certify under penalty of perjury List Submission application, or uploaded to the best of my knowledge.			-			
I further acknowledge that (1) the accur- responsibility of the debtor and the debtor's atto- that the various schedules and statements require	rney, (2) the cou	urt will	rely on the	creditor list	ing for all ma	ailings, and (3)
If this filing is an amendment to the cadeleted at this time. (For verification purpose deleted.)	·				_	
# of Creditors (or if amended, # Method of submission: a)X uploaded to Electronic Case b)Creditor List Submission app	e Filing System; plication (to be to or available in t	; or used by		rs, found on	the Court's	website at
/s/ Charles E. Cartwright, Trustee for Receiver						
Debtor Signature	Joint De	htor Si	anature			
Address:(if not represented by an attorney)			represented	l by an attor	rney)	
Phone:(if not represented by an attorney)	Phone:(i	if not re	epresented b	y an attorne	ey)	_
/s/ Sam G. Bratton	Date: A	pril 1, 2	2019			
Attorney Signature						
Sam G. Bratton	[Check					
Doerner, Saunders, Daniel & Anderson, L.L.P. Two West Second Street, Suite 700 Tulsa, OK 74103-3117 (918) 582-1211 (918) 591-5360	Cred	ditors w	vith foreign	addresses in	ncluded	
sbratton@dsda.com						

3M Case 19-01697-5-JNC Doc 1ac@ilecta@ta/@1x1/9r@niverendta@ta/@1/dr9 15x11@1a05 alexanged13 of 37

2807 PAYSPHERE CIRCLE PO BOX 613 5021 TAFT BLVD APT #4304 CHICAGO, Illinois 60674-0000 STILLWATER, Oklahoma 74076-0000CHITA FALLS, Texas 763

3M ACCURATENOW AIR EVAC EMS
REMITTANCE PROCESSING DEPT 7515 IRVINE CENTER DRIVE 1001 Boardwalk Springs, S2
MAIL STOP 224-05-N-42 IRVINE, California 92618-000 (Attn: Training Center

ST. PAUL, Minnesota 55144-0000

O'Fallon, Missouri 63368

A+ PRINTING ADVANCE BOILER REPR & SVC AIR MED CARE 119 N THIRD 36168 W STATE HWY 51 PO Box 948

PONCA CITY, Oklahoma 74601-000ANNFORD, Oklahoma 74044-0000West Plains, Missouri 65

ADVANCED FILING SYSTEM INC AIRGAS USA, LLC AAAASF

7500 GRAND AVENUE SUITE 200 9528 E 55TH STREET STE A PNC BANK
GURNEE, Illinois 60031-0000 TULSA, Oklahoma 74145-8151 PO BOX 676015

DALLAS, Texas 75267-6015

ABBOTT LABORATORIES INC

100 ABBOTT PARK ROAD

300 N. MERIDIAN SUITE 205-S PO BOX 415

ABBOTT PARK, Illinois 60064-00K10AHOMA CITY, Oklahoma 731070-SWASSO, Oklahoma 74055-

ABBVIE ADVANCED MOLECULAR DIAGNOSTICALEXANDER R GENTY
ATTN DEPT. V345 535 EAST CRESCENT AVE 19901 COKER ROAD
1 NORTH WAUKEGAN ROAD ATTN: CHIEF EXECUTIVE OFFICER TECUMSEH, OK 74873

NORTH CHICAGO, Illinois 60064RAMMSDEY, New Jersey 07446-0000

ABILITY NETWORK INC
DEPT CH 16577

AFCO INSURANCE PREMIUM FINANCELFA MEDICAL EQUIPMENT I
PO BOX 360572

265 POST AVE SUITE 350

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CARI LYNN REEVES
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1833 Shady Lane

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COMTRIX HEALTHCARE

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201 ST. CHARLES AVE. PO BOX 41602 PO BOX 36
STE. #114-373 PHILADELPHIA, Pennsylvania 1970/1874002 OK 74637

NEW ORLEANS, Louisiana 70170-0000

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FAIRFAX, Oklahoma 74637-0000 TULSA, Oklahoma 74153-00

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IKON OFFICE SOLUTIONS IntelliHARTX, LLC JANICE R LYONS
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TERESA HESKETT

40 Hospital Rd.

THE NATIONAL ALLIANCE OF RURATINGS STEELS
120 S Monroe Street
641 2ND ST NE

Fairfax, Oklahoma 74637-0000 Tallahassee, Florida 32301-0 PANNEE, Oklahoma 74058-0

TERESA HESKETT

354250 E 5700 RD

YALE, OK 74085

THE PAWNEE CLINIC

529 6TH STREET

529 6TH STREET

641 2ND STREET NORTHEAST

PAWNEE, Oklahoma 74058-0000

PAWNEE, OK 74058

TERRA J SMITH

45959 S. 352 RD

PAWNEE, OK 74058

THE REVIEW

PO BOX 6

PO BOX 6

SHIDLER, Oklahoma 74652-0006 BRYAN, Texas 77802-0000

TOBIE CASE: 129+01697-5-JNC Doc 1TRAINSTAME/R1/219 Entered 04/01/19 151112 25WERage 35 of 37

2128 FAIRFAX LAKE ROAD FBO HMC/CAH CONSOLIDATED CONTRACT WASDBY PARK DRIVE #1 FAIRFAX, OK 74637 FBO HMC/CAH CONSOLIDATED CONTRACT WASDBY PARK DRIVE #1 ATTN: PAYROLL PROCESSING SHAKOPEE, Minnesota 5537 WEST CHESTER, Ohio 45069-0000

TONI'S WESTSIDE HEALTHMART TranscriptionGear, Inc.
301 WEST GRAND AVE 7280 Auburn Road 400 WEST FRANK PHILLIPS
PONCA CITY, Oklahoma 74601-0000ncord, Ohio 44077-0000 BARTLESVILLE, Oklahoma 7

TONI'S WESTSIDE HEALTHMART TREAT'S SOLUTIONS LLC UNITED STATES TREASURY 301 WEST GRAND AVE PO BOX 847

PONCA CITY, Oklahoma 74601-00ADDA, Oklahoma 74821-0000

TONYA M CRINER

TRI-TEC MEDICAL INC

UNIVERSAL HOSPITAL SVCS

200 N IRVING

2255 GERMANTOWN ROAD SOUTH %Allen Maxwell & Silver

PONCA CITY, OK 74601

GERMANTOWN, Tennessee 38138-019000 Sylvan Ave

Englewood Cliffs, New Je

FAIRFAX, Oklahoma 74637-0000

TOWN OF FAIRFAX
TRIAD SERVICE COMPANY
UNIVERSAL HOSPITAL SVCS
4248 S 76TH AVE SUITE A
SDS 12-0940
PO BOX 399
TULSA, Oklahoma 74145-0000
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MINNEAPOLIS, Minnesota 5

TRACY N SOUTTER

TRIANIM HEALTH SERVICES

UNUM LIFE INS COMP OF AME
25197 NETWORK PLACE

PO BOX 409548

CHICAGO, Illinois 60673-0000 ATLANTA, Georgia 30384-9

TRACY SOUTTER TRUCODE, LLC UNUM LIFE INS COMP OF AME 3750 S MAIN STREET 150 BURFORD HOLLOW PO BOX 409548

BLACKWELL, Oklahoma 74631-677ALPHARETTA, Georgia 30022-000ACTLANTA, Georgia 30384-9

TRAILBLAZERS HEALTH ENTERPRISEULSA ADJUSTMENT BUREAU, INC UPS

8330 LBJ FREEWAY, EXECUTIVE CENTEANDREW ENLOW, INC.

DALLAS, Texas 75243-1213

1508 SOUTH CARSON AVENUE
TULSA, Oklahoma 74119-0000

CAROL STREAM, Illinois 6

TrancriptionGear, Inc
7280 Auburn Road
Concord, Ohio 44077-0000

U.S. BANK
Bankruptcy/Recovery Dept.
PO Box 5229
Cincinnati, OH 63179

US MED-EQUIP, INC.
PO BOX 41321
HOUSTON, Texas 77241-000

TRANE U.S. INC. UNIFORM STOP US SPECIALITY LABS
PO BOX 98167 1120 N DUCK STREET 11578 SORRENTO VALLEY ROA
CHICAGO, Illinois 60693-0000 SUITE F SUITE27

STILLWATER, Oklahoma 74075-0550N DIEGO, California 92

US TRU CESE 19A 01/16977-53-11NCER Doc 1/1/25-11NCER Doc 1/1/25-11

PO BOX 530202 VISION SERVICE PLAN-IC 410 W BELAIR ACCOUNT 661-11-44749 PO BOX 74529 FAIRFAX, OK 74637

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VYNE EDUCATION LLC WIN-CO FINANCE 9020 OVERLOOK BLVD, STE 140 416 W GRAND VENDOR G USER

BRENTWOOD, Tennessee 37027-0PONCA CITY, Oklahoma 746

VERIZON WIRELESS SERVICES LLCWALGREENS WINDSTREAM
PO BOX 660108 PO BOX 90484 PO BOX 9001908
DALLAS, Texas 75266-0000 CHICAGO, Illinois 60696-0484 LOUISVILLE, Kentucky 402

VICTORIA SALAMY-SULLINS WALLACH SURGICAL DEVICES WOODLAND AG BOOSTERS 9713 GREYSTONE AVE 95 CORPORATE DRIVE 106 S 6TH

OKLAHOMA CITY, Oklahoma 7312 TRUMBULL, Connecticut 06611-TATORFAX, Oklahoma 74637-

VICTORIA SALAMYSULLINS
9713 GREYSTONE AVE
0KLAHOMA CITY, OK 73120

WARDS AIR CONDITIONING, INC. WORKS & LENTZ OF TULSA, I
1437 BOULDER STE 900
PONCA CITY, Oklahoma 74601-0CTOLSA, Oklahoma 74119-00

VIDACARE CORPORATION WENDY L KINSER Z&Z MEDICAL, INC. 4350 LOCKHILL SELMA, STE 10 2681 CREEKVIEW ROAD 1924 ADAMS STREET SHAVANO PARK, Texas 78249-00@DLOGAH, OK 74053 CEDAR Falls, Iowa 50613-

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12149 S. State Hwy 51

1620 E 7TH AVENUE

25 MAUCHLY

Coweta, Oklahoma 74429-0000 KENNEWICK, Washington 99337-CORVOINE, California 92618

VITACARE AT HOME MEDICAL WEXFORD LABS, INC 1209 E PROSPECT AVENUE 325 LEFFINGWELL

PONCA CITY, Oklahoma 07460-1747RKWOOD, Missouri 63122-0000

VOLENTE HEALTHCARE LLC WHITE'S FOODLINER 4530 E SHEA BLVD SUITE #165 510 SEWELL AVE

PHOENIX, Arizona 85028-0000 PAWNEE, Oklahoma 74058-0000

VONCO MEDICAL PRODUCTS, INC WILLIAM C RICHARDS 1625 W CROSBY RD, STE 120 P.O. BOX 344

CARROLLTON, Texas 75006-0000 CARNEY, OK 74832

Case 19-01697-5-JNC Doc 1 Filed 04/01/19 Entered 04/01/19 15:12:05 Page 37 of 37

4/01/19 3:10PM

United States Bankruptcy Court Northern District of Oklahoma

In re	CAH Acquisition Company 12, LLC			Case No.	
		Debt	or(s)	Chapter	11
	CORPORATE	OWNERSHIP ST	ATEMENT (RU	ULE 7007.1)	
recusa follow more (ant to Federal Rule of Bankruptcy Procedul, the undersigned counsel for CAH Acting is a (are) corporation(s), other than of any class of the corporation's(s') equinal Acquisition CO, LLC, A West VA LLC	equisition Company the debtor or a gov	12, LLC in the a	above caption hat directly o	ned action, certifies that the r indirectly own(s) 10% or
HMC/	CAH Consolidated, Inc. A Delaware Co				
□ Noi	ne [Check if applicable]				
April	1, 2019	/s/ Sam G. Bratto	n		
Date		Sam G. Bratton			
		Signature of Atto		mnany 12 II	C
		Doerner, Saunder	-		
		Two West Second	d Street, Suite 700	-	
		Tulsa, OK 74103- (918) 582-1211 Fa			
		sbratton@dsda.c			